

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

204-0018

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	4	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	4 minus 20 =	8
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	Fee
BASIC FEE	385.00
XS 9=	<input type="checkbox"/>
X43=	<input type="checkbox"/>
+145=	<input type="checkbox"/>
TOTAL	385

RATE	Fee
BASIC FEE	770.00
XS18=	<input type="checkbox"/>
X86=	<input type="checkbox"/>
+290=	<input type="checkbox"/>
TOTAL	

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X43=	<input type="checkbox"/>
+145=	<input type="checkbox"/>
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	<input type="checkbox"/>
X86=	<input type="checkbox"/>
+290=	<input type="checkbox"/>
TOTAL ADDT. FEE	

(Column 1)

(Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE
ADDI-
TIONAL
FEE

RATE
ADDI-
TIONAL
FEE

RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X43=	<input type="checkbox"/>
+145=	<input type="checkbox"/>
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	<input type="checkbox"/>
X86=	<input type="checkbox"/>
+290=	<input type="checkbox"/>
TOTAL ADDT. FEE	

(Column 1)

(Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE
ADDI-
TIONAL
FEE

RATE
ADDI-
TIONAL
FEE

RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X43=	<input type="checkbox"/>
+145=	<input type="checkbox"/>
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	<input type="checkbox"/>
X86=	<input type="checkbox"/>
+290=	<input type="checkbox"/>
TOTAL ADDT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.